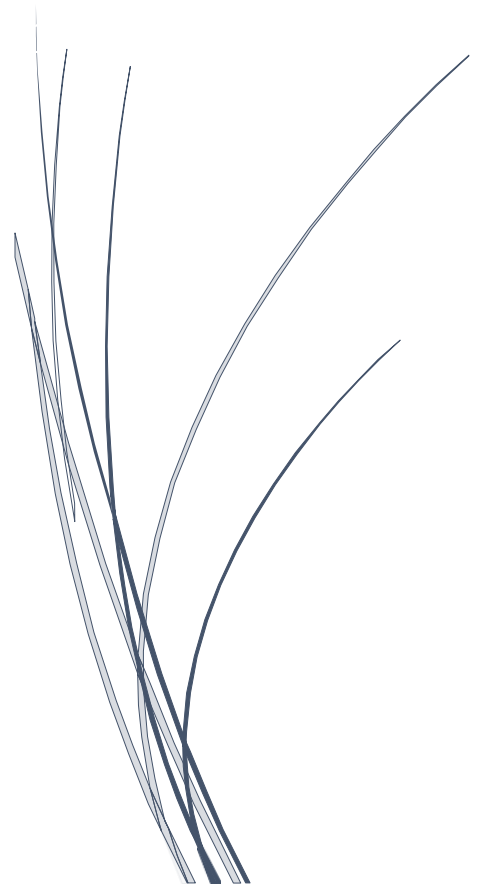




1st Semiannual 2023

Children's Division Access to Medical Records Report

Report for January 1, 2023 – June 30, 2023



Introduction

The Department of Social Services (the Department) oversees several programs to support the general welfare of children in the State of Missouri. The Department has established the Children's Division to administer and manage the programs for children who are in the legal custody of the state. The Children's Division promotes the well-being of Missouri children by partnering with parents, family/community members, and government agencies. The Children's Division has developed specific programs to provide specialized services. These programs help strengthen families through intervention, prevention, adoption, and foster care.

Each Children's Division program is unique; however, the emphasis of this report is on the children in the "Missouri Foster Care Program." This refers to children placed away from their parents or placed in Children's Division custody for 24-hour care. A foster care program includes placements in: foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, and pre-adoptive homes. When children are suddenly separated from their parents or other caregivers for entrance into the foster care system, it can be a difficult and traumatic time for families. When the child is in Children's Division custody, it is in the best interests of the child for parents, resource providers, and case managers to know that child's medical history and current information and share that medical history with those individuals who are providing care.

This report documents the commitment of the Children's Division to ensure that pertinent medical records and/or medical information for a child will be made available to appropriate members of the child's treatment and/or family support team. The child's teams may include resource providers (such as foster parents), a guardian ad litem, medical care providers, parents, and other individuals who provide support or services to a child or family. Access to medical records and/or medical information is consistent with federal and state law and Children's Division policy.

To ensure the confidentiality, maintenance of, and access to a child's medical record are consistent with applicable provisions of federal and state law, Children's Division is compliant with the Department's information security policy. The information security process was implemented to be in compliance with the federal Health Insurance Portability and Accountability Act and the State of Missouri's Sunshine Law requirements.

The term medical record is used to describe the systematic documentation of a child's medical history and plan of care. The medical record includes a variety of "notes" entered by health care providers. These notes include, but are not limited to: orders for the administration of drugs and therapies, laboratory results, treatment/service plans, and observations of the child's symptoms and/or responses to treatment. The information contained in the medical record allows health care providers to assess the child's current treatments and review previous medical history. This can increase the providers' ability to prescribe safe and effective remedies. The medical record serves as the central source for planning the child's care and documenting the provision of medical services.

The Children's Division has placed great importance on the oversight and coordination of medical/behavioral health services provided to children in its care and custody. Access to medical records is a vital and essential service for each child. The medical records can provide prescribers, the child, parent(s), placement providers, and case managers with enough information to promote the effective and efficient delivery of various medical/behavioral health treatments. This report contains Children's Division's current efforts to create access to medical records and their future plans to provide access to these records.

Current Efforts for Access to Medical Records

The Family Support Team (FST) is the preliminary source for access to medical records and/or medical information for a child/youth in foster care. The Children's Division staff facilitate the FST through invitation and collaboration with members of the team. During the FST meetings, any request for access to medical information can be discussed to ensure that only pertinent medical records and/or medical information are accessed. The FST members focus on development of the "Social Service Plan (Plan)." The Plan includes the utilization of the Initial Family Assessment directions for the distribution of the [Health Care Information Summary](#), and [Child/Family Health and Developmental Assessment](#) forms. These forms are required to be completed and provided to the resource provider within 72 hours whenever possible, but no later than 30 days following the initial placement date. At the time of a subsequent placement, the assessment, an updated summary form, and all prior [Monthly Medical Logs](#) must be provided to the resource provider no later than 72 hours following the subsequent placement date. The consistent completion and delivery of these forms can provide valuable medical/health information to guide services.

A Show Me Healthy Kids (SMHK) managed care specialty plan service called the Health Passport (Passport) has been implemented and is accessible to providers, as well as specific Children's Division and Home State Health staff through the Passport portal. The Passport retrieves clinical and claims data from both internal and external systems and exports the information into a format that allows providers to load a specialty plan member's health/medical record directly into that provider's Electronic Health Record (EHR) system. SMHK staff upload medical documents to the members EHR through the portal. Although access to the Passport has been limited to specific Children's Division staff members, progress is underway to extend access to Children's Division and Foster Care Case Management staff statewide.

The Children's Division has been working with the Enterprise Project Management Office of the State of Missouri's Office of Administration to continue mapping out the current business processes for each section in the Family and Children Electronic System, known as FACES. A private agency has been contracted to serve as project manager for the planning and implementation of Children's Division new Comprehensive Child Welfare Information system, being designed to replace FACES. The fundamental functions of the system continue to be the initial Intake of a call at the Child Abuse/Neglect Hotline, to the Investigation and Assessment of that call and then, when warranted, to the Case Management function where ongoing services are provided to children/youth and families. The FACES system contains an immense amount of data to support/document all services i.e., investigations, foster care, adoptions, provided to children/youth and families. In an effort to rebuild this massive system, the Children's Division project administrators have divided the project into sections and are presenting system design sessions for each section. The administrators have asked Children's Division staff in all job titles to attend the sessions, describe their best and worst day-to-day system experiences in the FACES system, and what changes could be made to improve the new system. This creates the ability to develop and incorporate a resourceful method that will allow appropriate individuals access to medical information in the new Comprehensive Child Welfare Information system.

The access to medical information has been a focal point for the Health Information Networks (HIN). One of the HINs is the Show-Me Health Information Network of Missouri (SHINE). SHINE is a physician-led HIN delivered in partnership with the Missouri State Medical Association that offers a set of health information technology tools to help health professionals across the state of Missouri with continuity of care. Children's Division, in partnership with MO HealthNet Division staff, have been testing the SHINE portal to determine if access can provide the medical information needed to review the prescription and administration of psychotropic medications for children/youth in foster care.

Medical documents for children/youth in foster care continue to be maintained and can be accessed in the Children's Division document imaging system called "OnBase." The documents can be scanned or uploaded through electronic mail into OnBase and placed in the child/youth's OnBase file.

Future Plans for Access to Medical Records

There are various federal, state, and private agency initiatives centered on access to medical records and/or medical information. The Children's Division has reviewed and tested several methods with varying results. Although systems such as the Oracle/Cerner pilot project were reviewed, cost-effectiveness and feasibility could not be established. The SMHK Passport has been the forerunner for new methods, with OnBase being the fundamental source. In addition, the goal is to continue to partner with the MO HealthNet Division to test the SHINE portal and provide feedback for ways to enhance and improve the medical information available through the portal. Access to medical records and/or medical information has significant connections to the development and implementation of a medical records system.

Children's Division remains committed to developing and operating a statewide medical records system and creating protocols for access to that system. Children's Division will continue their efforts to maintain and expand access to medical records and information.